Only

STATEMENT OF

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FEC FORM 1	ORGANIZATION								Office Use Only							
1. NAME OF COMMITTEE (ir	n full)		Check if name changed)		mple:If typin	g, type	12	FE4N		1		7				
BRYAN CA	VE L	LP POI	LITICAL	ACTI	ON CC	OMMI	TTE	E								
ADDRESS (number a	nd street)	1155 F St	reet NW													
☐ ◀ (Check if a is changed		Suite 700 Washingt	on TY 🛦				DO		200	004	ZIF] - [DE A			
COMMITTEE'S E-MA	AIL ADDRE	ESS														
X ◀ (Check if a is changed		josh.jan	nes@bryand	cave.com						l						
			Second E-Mai Russell@br		.com											
COMMITTEE'S WEB (Check if a is changed	address	DDRESS (UR	RL)													
2. DATE 0	7 2	5 Y	2011													
3. FEC IDENTIFIC	CATION N	UMBER ▶	C	C0033264	13											
4. IS THIS STATEN	MENT	NEW	(N) OF	×	AMENI	DED (A)										
I certify that I have e	examined t	his Statemer	nt and to the I	pest of my	knowledge a	nd belief	it is true	e, corre	ect and	d com	plete.					
Type or Print Name	of Treasure	er Christoph	ner Rodgers													
Signature of Treasure	er <i>Chri</i>	stopher Rodger	rs		[Electronical	ly Filed]	Date	М	02	/ D	19	/ Y	2015			
NOTE: Submission of	false, error		mplete informa GE IN INFORM							pena	lties o	f 2 U.	S.C. §	437g.		
Office Use		For further information of Federal Election Commission Toll Free 800-424-9530								FEC FORM 1 (Revised 06/2012)						

Toll Free 800-424-9530

Local 202-694-1100